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## BIB DATA SHEET

CONFIRMATION NO. 4635

|  |   |  |                               |   |                          |                                |
|--|---|--|-------------------------------|---|--------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/710,636   | <b>FILING or 371(c)<br/>DATE</b><br>07/26/2004<br><b>RULE</b>   | <b>CLASS</b><br>428                          | <b>GROUP ART UNIT</b><br>1794 | <b>ATTORNEY DOCKET NO.</b>  |                          |                                |
| <b>APPLICANTS</b><br>Serena Giori, Riverwoods, IL;<br>Claudio Giori, Riverwoods, IL;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>09/07/2004 |   |  |                               |   |                          |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                | <input type="checkbox"/> Met after Allowance | <b>STATE OR COUNTRY</b><br>IL | <b>SHEETS DRAWINGS</b><br>0   | <b>TOTAL CLAIMS</b><br>4 | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>Serena Giori<br>2975 Orange Brace Rd<br>Riverwoods, IL 60015   |   |  |                               |   |                          |                                |
| <b>TITLE</b><br>Self-Cooling Beverage Container With Permeable Wall  |   |  |                               |   |                          |                                |
| <b>FILING FEE RECEIVED</b><br>450  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                          |                                |